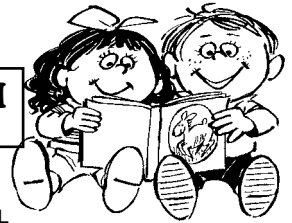




ALAMEDA RECREATION AND PARK DEPARTMENT  
2226 Santa Clara Avenue, Alameda, CA 94501 - (510) 747-7529



# SMALL FRYS AND TINY TOTS REGISTRATION FORM

(Please print)

☐ BOY  
☐ GIRL

CHILD'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_ BIRTHDATE \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_ YRS, \_\_\_\_ MOS. STAFF VERIF. \_\_\_\_\_

ALLERGIES, MEDICAL PROBLEMS, MEDICATIONS \_\_\_\_\_

MOM/GUARDIAN'S NAME \_\_\_\_\_ ADDRESS (if different from above) \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_ WORK PHONE (\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_

DAD/GUARDIAN'S NAME \_\_\_\_\_ ADDRESS (if different from above) \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_ WORK PHONE (\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_

IN CASE OF AN EMERGENCY, PLEASE CONTACT: (I understand that it is my responsibility to provide current phone numbers)

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

HOME PHONE (\_\_\_\_) \_\_\_\_\_ WORK PHONE (\_\_\_\_) \_\_\_\_\_ CELL PHONE (\_\_\_\_) \_\_\_\_\_

PERSON(S) AUTHORIZED TO PICK-UP CHILD: \_\_\_\_\_

## **SMALL FRYS** Ages 3 years to 3 years, 11 months

List your 1st, 2nd &  
3rd location choices:

**9:00 AM-12:00 NOON**

\_\_\_\_ M/W/F .. Godfrey  
\_\_\_\_ T/Th ..... Godfrey  
\_\_\_\_ M/W/F ... Littlejohn  
\_\_\_\_ T/Th ..... Littlejohn  
\_\_\_\_ T/Th ..... McKinley  
\_\_\_\_ T/Th ..... Washington

## **TINY TOTS** Ages 4 years to 5 years

### **EITHER:**

**2 Days (T/Th) OR 3 Days (M/W/F)**

List your 1st, 2nd & 3rd location choices:

**9:00 AM-12:00 NOON**

\_\_\_\_ M/W/F ..Leydecker  
\_\_\_\_ T/Th .....Leydecker  
\_\_\_\_ M/W/F ...McKinley  
\_\_\_\_ M/W/F ...Washington  
\_\_\_\_ M/W/F ...Woodstock

**12:00 NOON  
TO 3:00 PM**

Bring your  
bag lunch  
\_\_\_\_ M/W/F  
McKinley  
(only)

## **TINY TOTS** Ages 4 years to 5 years **5 Days (Monday through Friday)**

\_\_\_\_ Tue/Thu ..... Leydecker

Combine Tue/Thu Leydecker class with one of  
the following Monday/Wednesday/Friday site  
(list your 1st, 2nd & 3rd location choices):

**9:00 AM TO 12:00 NOON**

\_\_\_\_ M/W/F ... Leydecker  
\_\_\_\_ M/W/F .... McKinley  
\_\_\_\_ M/W/F .... Washington  
\_\_\_\_ M/W/F .... Woodstock

**12:00 NOON TO 3:00 PM**

Bring your bag lunch  
\_\_\_\_ M/W/F ... McKinley

☐ Mark this box if you wish to attend **Morning and  
Afternoon MCKINLEY** Mon/Wed/Fri classes  
**9:00 a.m. to 12:00 noon AND 12:00 noon to 3:00 p.m.**

## **PARENTS/GUARDIANS: Please Read and Initial**

**LATE PICK UP FEE:** I understand that if my child is not picked up by 12:10 p.m. (or 3:10 p.m. for Afternoon McKinley class),  
a late fee of \$1 per minute for every minute I am late will be charged beginning at 12:11 p.m. (or 3:11 p.m. for Afternoon McKinley class).  
I also understand that the fee must be paid that day..... (initial)

**ABSENCES:** I understand that credits, refunds or make-ups will not be given when my child is absent from the program. .... (initial)

**SIGN OUT:** I understand that my child must be signed out by an authorized person..... (initial)

**PAYMENT:** I understand that full payment is due at the time of registration. However, if I choose to pay in installments,  
I understand that it is my responsibility to pay the next installment by the due date. If I miss the due date, I understand that I will  
be charged an automatic \$30 late fee ..... (initial)

1. **THE UNDERSIGNED HEREBY RELEASES, WAIVES AND DISCHARGES THE CITY OF ALAMEDA**, its directors, officers, employees, agents, and independent contractors from all liability to the undersigned and/or his/her personal representatives, assignees, heirs, and next of kin for any loss or damage and any claim or demands accruing or resulting from injury to the person or property or death of the undersigned, whether or not caused by the negligence and/or property of the City of Alameda, its directors, officers, employees, agents, and independent contractors.

2. **THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE**, whether or not it is due to the negligence of the City of Alameda, its directors, officers, employees, agents, and independent contractors or otherwise while in, upon or about the premises of the City of Alameda and/or while using the premises or facilities or equipment thereon.

3. **THE UNDERSIGNED HEREBY PERMITS** the taking of photographs of themselves and/or the participant by the City of Alameda during recreation classes or activities to be used at the City's discretion.

**THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE, WAIVER OF LIABILITY AND INDEMNITY AGREEMENT AND POLICIES AND PROCEDURES STATED ABOVE**, and further agrees that no oral representations, statements or inducement apart from the foregoing written agreement has been made. **I HAVE READ THIS RELEASE.**

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

☐ FALL ☐ SPRING  
☐ WINTER ☐ SUMMER

AMOUNT ENCLOSED \$ \_\_\_\_\_ ☐ FULL PAYMENT ☐ INSTALLMENT DATE: \_\_\_\_\_  
CASH CHECK MASTERCARD/VISA \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ EXP DATE \_\_\_\_\_